NOTIFICATION OF DEMOLITION AND RENOVATION

Job#4994

Operator Project #	Postma	Postmark		Date Received		Notification #		
						055.2110.2105		
TYPE OF NOTIFICATION (O-	-Original, R-Revised, C-Cand	celled):	0					
FACILITY INFORMATION (16	dentify Owner, Removal Co	ntractor and Oth	er Operato	or):				
OWNER NAME: Verizon Co	ommunication							
Address: 700 Hidden	n Ridge			D- II II				
City: Irving	Irving			State: Texas		Zip: 75038		
Contact Name: Lufus Owusu						Telephone: (516) 659-3503		
REMOVAL CONTRACTOR:	Pinnacle Environr	mental Corp.			,		-	
Address:	200 Broad Street							
City:	Carlstadt			NJ	Zip: 07072			
Contact Name: Joseph Patrick			Telephone: (201) 939-6565) 939-6565		
OTHER CONTRACTOR:				<				
Address:								
City:				State:		Zip:		
Contact Name:					Telephone:			
TYPE OF OPERATION (D-Den	no, O-Ordered Demo, R-Ren	novation, E-Emr.	Renovatio	n): R				
IS ASBESTOS PRESENT? (YES	NO) Yes							
FACILITY DESCRIPTION (Incl	ude Building Name, Numbe	er and Floor or Ro	oom Numl	oer)				
Building Name:						= -		
Address: 547 Clinton	Avenue							
City: Brooklyn			State: New York		Co	County: Kings		
Site Location: Cellar								
Building Size: 75,000SF	75,000SF			ors: 6	Ag	Age In Years: 1950		
Present Use: Commercial			Prior Use:					
Procedure, Including Analytical		sed To Detect The PLM - Polarized I			l:			
Approximate amount of asbesto including: 1. Regulated ACM to be removed. 2. Category I ACM not removed. 3. Category II ACM not removed.	to be removed		Nonfriable Asbestos Material ot to be removed			Indicate Unit of Measurement Below		
	- -	CATI		CAT II		UNIT		
Pipes	300	ir e. Ta u sir i			LnFt:	x	Ln M:	
Surface Area	By By State	ST Lass Day		A 30 30 2 3 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	SqFt:	De le este distant	Sq M:	
Vol. RACM off Facility Compon	ent				CuFt:	- 1	Cu M:	
Scheduled Dates Asbestos Remo	Start: 01-21-16			Complete: 12-31-2016				
Schedules Dates Demo/Renovation (mm/dd/yy) Start:					Complete:			

DESCRIPTION OF PLANNED DEMOLITION OR RENOVATION WORK, AND METHOD(S) TO BE USED: DESCRIPTION OF WORK PRACTICES AND ENGINEERING CONTROLS TO BE USED TO PREVENT EMISSIONS OF ASBESTOS AT THE DEMOLITION AND RENOVATION SITE: HEPA Vacs, MicroTraps (Negative Air Pressure) and amended water will be utilized for emissions control. **WASTE TRANSPORTER #1** Name: Tri State Transfer, Inc. Address: 1199 Randall Avenue City: Bronx State: NY Zip: 10474 Contact Name: Jimmy Byrne Telephone: 718-617-0771 **WASTE TRANSPORTER #2** Name: ATC, Inc. #3- PCC Construction & Contractors, Inc. Address: 2 Moriches Middle Island Road / #3- 200 Broad Street City: Shirley #3- Carlstadt State: NY / #3 - NJ Zip: 11967 / #3 - 07072 Contact Name: Kenny Smith #3- Joseph Whelan Telephone: 631-924-5050/#3 -201-939-6565 WASTE DISPOSAL SITE (#1 or #2) Name: Minerva Enterprises, Inc. 9000 Minerva Road City: Waynesburg State: OH Zip: 44688 330-866-3435 Telephone: IF DEMOLITION ORDERED BY A GOVERNMENT AGENCY, PLEASE IDENTIFY THE AGENCY BELOW: Name: Title: Authority: Date of Order (mm/dd/yy): Date Ordered to Begin(mm/dd/yy): FOR EMERGENCY RENOVATIONS Date and Hour of Emergency(mm/dd/yy): Description of the Sudden, Unexpected Event: Explanation of how the event caused unsafe conditions or would cause equipment damage or an unreasonable financial burden: DESCRIPTION OF PROCEDURE TO BE FOLLOWED IN THE EVENT THAT UNEXPECTED ASBESTOS IS FOUND OR PREVIOUSLY NONFRIABLE ASBESTOS MATERIAL BECOMES CRUMBLES, PULVERIZED, OR REDUCED TO POWDER. Any ACM which is discovered unexpectedly, or non-friable ACM which becomes crumbled will be immediately wet with amended water and cleaned up with HEPA Vacs, to be put in 6 mil poly bags for proper disposal. I CERTIFY THAT AN INDIVIDUAL TRAINED IN THE PROVISIONS OF THIS REGULATION (40 CFR PART 61, SUBPART M) WILL BE ON-SITE DURING THE DEMOLITION OR RENOVATION AND EVIDENCE THAT THE REQUIRED TRAINING HAS BEEN ACCOMPLISHED BY THIS PERSON WILL BE AVAILABLE FOR INSPECTION DURING NORMAL BUSINESS HOURS. (required 1 year after promulgation) Signature of Owner/Operator Date: 01-07-16 I certify that the above information is correct. Signature of Owner/Operator Date: 01-07-16